The Expanded Programme on Immunization

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AN INTEGRAL PART
OF PRIMARY HEALTH CARE

World Health Organization

How did the Expanded Programme on Immunization begin?

In 1974 the World Health Assembly initiated a global immunization effort under the banner of the Expanded Programme on Immunization (EPI).

All countries of the world now provide immunization services against six childhood diseases:

- Diphtheria
- Measles
- Poliomyelitis
- Tetanus
- Tuberculosis
- Whooping cough

In 1988 and 1989, the World Health Assembly added four new goals for the EPI for the decade of the 1990s:

- to eliminate newborn tetanus worldwide by the year 1995;
- to reduce measles by 90% worldwide by the year 1995;
- to eradicate poliomyelitis worldwide by the year 2000;
- to achieve and sustain at least 90% immunization coverage by the year 2000.

SMALLPOX ZERO IN 1979

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NEWBORN TETANUS ZERO BY 1995

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POLIO ZERO BY 2000

The global eradication of smallpox gave the world a chance for new challenges:

- to provide immunization services to all women and children of the world;
- to protect all children before their first birthday against six of the most deadly and crippling childhood diseases;
- to protect women and their newborn children against tetanus.

Poster produced in 1977 to help seek out the last cases of smallpox. This success story signalled the start of the Expanded Programme on Immunization.

READEX FICHE

80% IMMUNIZATION COVERAGE ACHIEVED BY THE END OF 1990

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90% IMMUNIZATION COVERAGE ACHIEVED BY 2000

What successes have been achieved in the Expanded Programme on Immunization?

The EPI has made a good start.

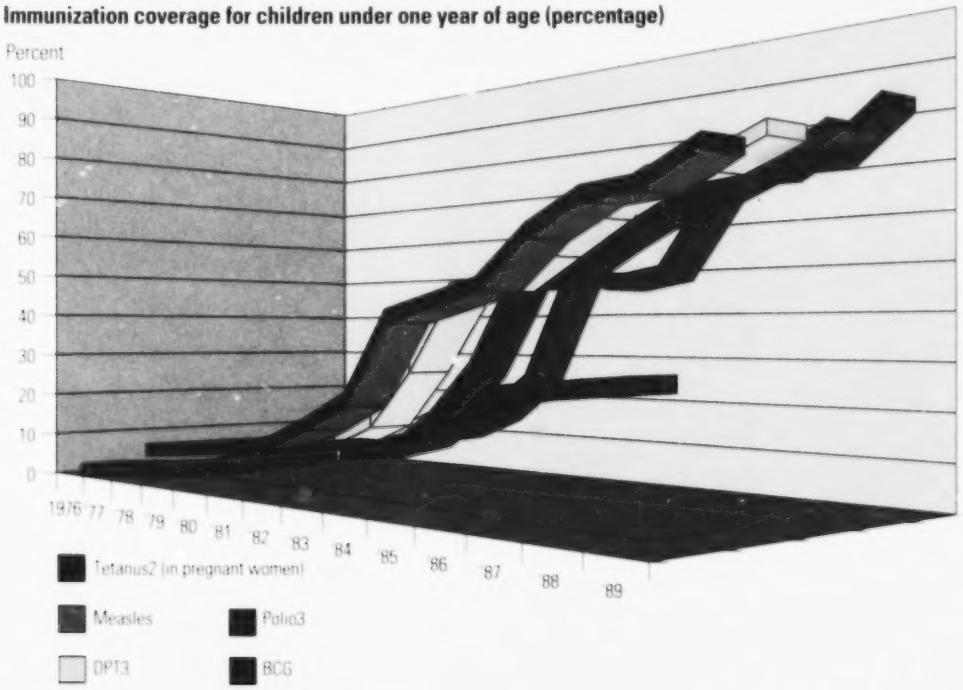
Since the beginnings of the EPI, the number of children immunized in the developing world has increased from:

- less than 1 in 20 to
- almost 3 in 4.

Progress was slow at first as the countries prepared their immunization plans and invested in training. Since 1982 the Programme has made such fast progress that it seems that 90% global immunization coverage will be achieved by the end of 2000.

However, tetanus of the newborn remains EPI's "Forgotten Disease" with fewer than 1 in 3 pregnant women receiving tetanus vaccine.

Immunization coverage for children under one year of age (percentage)



WE CAN SAVE 2 600 000 MORE LIVES EACH YEAR

How much have the diseases reduced?

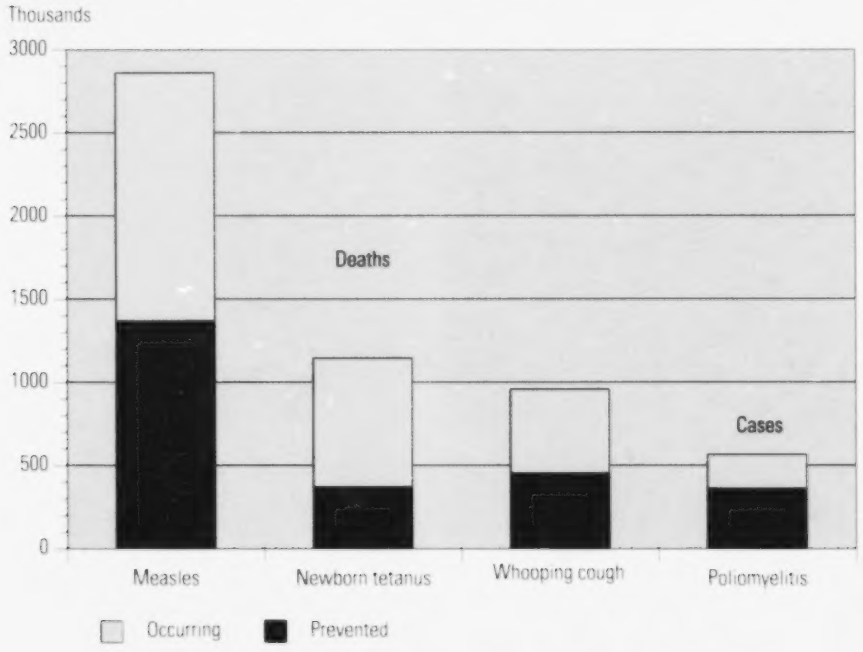
The EPI is currently preventing some 2.6 million deaths per year.

Almost five deaths are being averted with each passing minute.

Over 400 000 cases of polio are also being prevented each year.

These figures, although impressive, should not hide the fact that there are still 2.6 million deaths occurring each year – as well as 190 000 cases of paralytic polio. All of these can be prevented by immunization.

Death and disease prevented by the Expanded Programme on Immunization



Half the deaths and disability are being prevented. Half are still occurring.

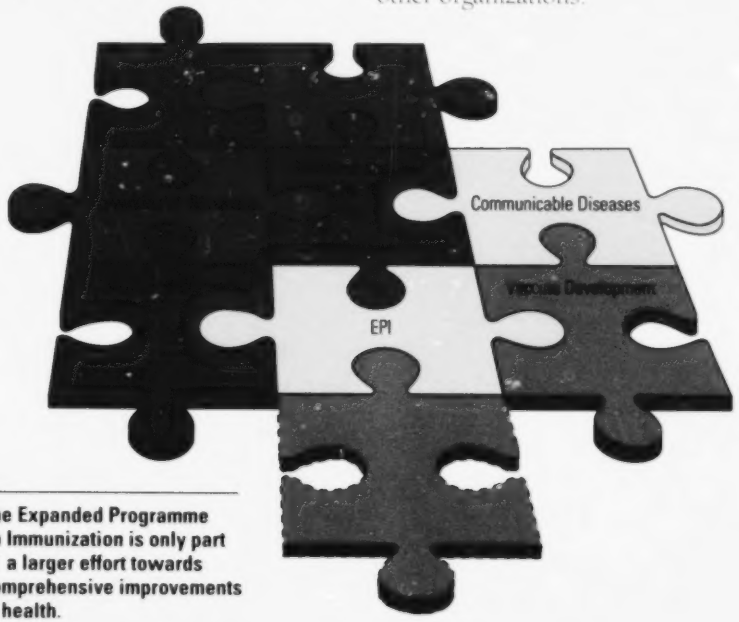
How were these successes achieved?

AT THE HEART OF THE GLOBAL COALITION ARE THE MINISTRIES OF HEALTH

The Global coalition.

The Expanded Programme on Immunization has achieved its success by an unprecedented degree of cooperation between a wide range of different organizations.

At the heart of this collaboration are the Ministries of Health. They are supported principally by the Governments of Australia, Canada, China, Denmark, Finland, Italy, Japan, the Netherlands, Norway, Sweden, the UK, and the USA. Other contributors include the Rockefeller Foundation, Rotary International, UNDP, UNICEF, WHO, the World Bank, and many other organizations.



The Expanded Programme on Immunization is only part of a larger effort towards comprehensive improvements to health.

The single most important achievement of the EPI has been to work with this diverse group of organizations to ensure that each is working towards common targets to increase immunization coverage and reduce disease incidence.

The purpose is to develop the structure and organization so that immunization will continue even when the donors move on to other priorities.

This means that the Expanded Programme on Immunization is an essential part of a larger thrust towards improved health in general.

Immunization services are performed by primary health care workers. There are only a few specialized EPI workers and they work closely with other Ministry Departments in promoting better primary health care.

What does the World Health Organization contribute?

The Expanded Programme on Immunization belongs to each country's Ministry of Health.

The World Health Organization is composed of its member states. Its role is to strengthen national health policy through technical leadership; EPI's role is to strengthen immunization policy.

Although many other organizations contribute to the following immunization activities, WHO's main roles are to develop:

- **Global goals**
  Immunization targets and disease reduction goals;
- **Immunization policies**
  Which vaccines to use, when and how to use them;
- **Training materials**
  An estimated half million people have been trained using EPI materials;
- **Cold chain equipment and management methods**
  Almost all countries can now demonstrate they are using potent vaccines;
- **Research and development**
  Field testing of new vaccines and operations research for better management;
- **Coordination of other agencies**
  Ensuring the pursuit of common goals;
- **Evaluation of country programmes**
  Working with Ministries to identify strengths and weaknesses of their programmes;
- **Technical expertise in the countries**
  Providing technical consultations for resolving special problems.

For each drop of polio vaccine put into a child's mouth, many different agencies have worked with the Ministry of Health to ensure that this seemingly simple event can happen.

The future...

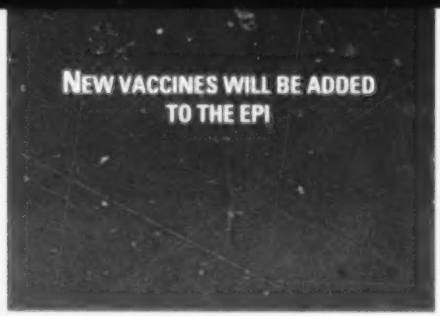
MAINTAIN HIGH IMMUNIZATION COVERAGE WHILE REDUCING DISEASE INCIDENCE

During the decade of the 1990s the challenge will be to change the EPI from being an immunization programme to one that *maintains high immunization coverage* levels while *reducing disease incidence*.

- **Measles will be reduced by 90% by 1995** (Currently causing some 1.4 million deaths per year)
- **Tetanus of the newborn will be eliminated by 1995.** (Currently causing some 800 000 deaths per year)
- **Polio will be eradicated by the year 2000.** (Currently causing some 190 000 cases of paralysis per year)

What can parents do to protect their babies? The answer is immunize, immunize and immunize.

But this is not all...



Further changes are envisioned during the 1990s:

- **Disease surveillance will be improved.**
  Progress will be measured and resources directed to the parts of the programme that need them most.

- **New vaccines will be added to the EPI.**
  (such as Hepatitis B, Yellow Fever, and then Malaria and AIDS vaccines)

  They will be added:

  – when the vaccines become available

  – when the diseases become a public health priority in countries, and

  – when the prices of the vaccines reduce to a level where the countries or donors can afford to buy them.

- **Individual programmes will become more efficient in management.**
  These skills will be used to support other health activities.

What is needed from the international community?

GOOD MANAGEMENT REQUIRES SPECIAL SKILLS AND ADEQUATE RESOURCES.

During the 1980s each fully immunized child typically cost US$ 10, with the Ministries of Health contributing US$ 7 and the international community US$ 3.

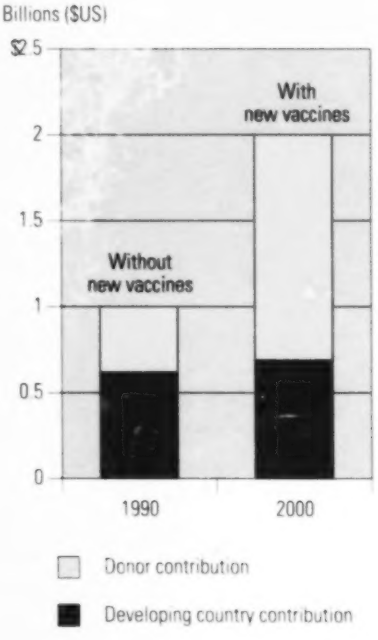
During the 1990s, with the addition of new vaccines, the total cost is likely to double to US$ 20 per child. There is little prospect that the countries themselves will be able to pay for a larger share of the costs.

Estimated additional resources needed each year by the Expanded Programme on Immunization

Figures in millions of US$

	WHO Geneva	WHO Regions	Countries	Total
Staff	1.5	4.0	8.0	13.5
Coordination	1.5	0.6	–	2.1
Workshops	0.2	0.4	0.7	1.3
Surveillance	1.4	2.0	3.0	6.4
Training	0.5	0.5	1.6	2.6
Laboratories	0.1	0.2	0.7	1.0
Research	2.2	0.4	2.5	5.1
Cold chain	0.4	0.2	1.1	1.7
Social Mobilization	0.2	0.3	1.0	1.5
Supervision	0.1	0.1	0.8	1.0
TOTALS	**8.1**	**8.7**	**19.4**	**36.2**

Projected increase in donor contributions needed from 1990 to the year 2000.



YOUR CONCERN
IS NOT ENOUGH.

The Expanded Programme on Immunization needs support:

- **Political support** from the highest levels to ensure that the health services are receiving all the resources that are required.
- **Community support** and social mobilization to convince parents that it is their duty to have their children fully immunized.
- **Financial support** to the countries most in need.
- **Financial support** to the international organizations to provide the technical and management support needed in the countries.

Your concern is not enough. We are seeking your active support in this effort to protect some 100 million children from needless suffering, death and disability.

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